



TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | | | |
|--|----|------------------------|-------------------|
| | | Application No. | 09/612,607 |
| | | Filing Date | July 7, 2000 |
| | | First Named Inventor | Daniel E. Grupp |
| | | Art Unit | 2814 |
| | | Examiner Name | Wille, Douglas A. |
| Total Number of Pages in This Submission | 19 | Attorney Docket Number | 3771P001D |

ENCLOSURES (check all that apply)

| | | | |
|---|---|---|---------|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication to Group <input checked="" type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): | |
| | | Postcard | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">Remarks</td> </tr> </table> | | | Remarks |
| Remarks | | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|---|
| Firm or Individual name | Tarek N. Fahmi, Reg. No. 41,402 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP |
| Signature | |
| Date | July 12, 2005 |

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Appeal Brief-Patents, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

| | | | |
|-----------------------|--------------|------|---------------|
| Typed or printed name | Geneva Walls | | |
| Signature | | Date | July 12, 2005 |

Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wir) 06/04/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



Fee Transmittal for FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)
1,120.00

| Complete If Known | |
|----------------------|-------------------|
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| Examiner Name | Wille, Douglas A. |
| Art Unit | 2814 |
| Attorney Docket No. | 3771P001D |

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments
 under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

| Large Entity | Small Entity | Fee Description | Fee Paid |
|---------------------------|--------------|---|------------------|
| Fee Code | Fee Code | | |
| Fee Code | Fee Code | | |
| 1051 | 130 | 2051 65 Surcharge - late filing fee or oath | |
| 1052 | 50 | 2052 25 Surcharge - late provisional filing fee or cover sheet. | |
| 2053 | 130 | 2053 130 Non-English specification | |
| 1251 | 120 | 2251 60 Extension for reply within first month | 120.00 |
| 1252 | 450 | 2252 225 Extension for reply within second month | |
| 1253 | 1,020 | 2253 510 Extension for reply within third month | |
| 1254 | 1,590 | 2254 795 Extension for reply within fourth month | |
| 1255 | 2,160 | 2255 1,080 Extension for reply within fifth month | |
| 1401 | 500 | 2401 250 Notice of Appeal | 500.00 |
| 1402 | 500 | 2402 250 Filing a brief in support of an appeal | 500.00 |
| 1403 | 1,000 | 2403 500 Request for oral hearing | |
| 1451 | 1,510 | 2451 1,510 Petition to institute a public use proceeding | |
| 1460 | 130 | 2460 130 Petitions to the Commissioner | |
| 1807 | 50 | 1807 50 Processing fee under 37 CFR 1.17(q) | |
| 1806 | 180 | 1806 180 Submission of Information Disclosure Stmt | |
| 1809 | 790 | 1809 395 Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 1810 | 790 | 2810 395 For each additional invention to be examined (37 CFR § 1.129(b)) | |
| Other fee (specify) _____ | | | |
| SUBTOTAL (2) | | | (\$) 1,120.00 |

SUBMITTED BY

Complete (if applicable)

| | | | | | |
|-------------------|----------------|--------------------------------------|--------|-----------|----------------|
| Name (Print/Type) | Tarek N. Fahmi | Registration No. (Attorney/Agent) | 41,402 | Telephone | (408) 947-8200 |
| Signature | | | | Date | 07/12/05 |